BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

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DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on March 4,2016.

IT IS SO ORDERED: February 5, 2016.

MEDICAL BOARD OF CALIFORNIA

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Howard Krauss, M.D.

Chair, Panel B

1 2	KAMALA D. HARRIS Attorney General of California JANE ZACK SIMON			
3	Supervising Deputy Attorney General MACHAELA M. MINGARDI			
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7	Attorneys for Complainant			
8	BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA			
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10	11			
11	Revoke Probation Against:	ase No. 800-2015-012357		
12	JULIE ANNE WINFIELD, M.D.	AH No. 2015100434		
13		TYPE A TEND CENTER DATES OF A SID		
14	D	FIPULATED SETTLEMENT AND ISCIPLINARY ORDER		
15	Physician's and Surgeon's Certificate No. A55830			
16	Respondent.			
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18	IT IS HERERY STIPULATED AND AGREI	ED by and between the parties to the above-		
19	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above- entitled proceedings that the following matters are true:			
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21	1. Kimberly Kirchmeyer ("Complainant")	is the Executive Director of the Medical		
22	Board of California. She brought this action solely			
23	this matter by Kamala D. Harris, Attorney General of the State of California, by Machaela M.			
24				
25	2. Respondent Julie Anne Winfield, M.D.	("Respondent") is represented in this		
26	proceeding by attorney Thomas Still, Esq., whose a	ddress is: Hinshaw, Marsh, Still & Hinshaw,		
27	LLP, 12901 Saratoga Avenue, Saratoga, California 95070.			
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3. On or about March 13, 1996, the Medical Board of California issued Physician's and Surgeon's Certificate No. A55830 to Julie Anne Winfield, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation & Petition to Revoke Probation No. 800-2015-012357 and will expire on May 31, 2017, unless renewed.

JURISDICTION

- 4. An Accusation and Petition to Revoke Probation No. 800-2015-012357 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and Petition to Revoke Probation and all other statutorily required documents were properly served on Respondent on April 21, 2015. Respondent timely filed her Notice of Defense contesting the Accusation and Petition to Revoke Probation.
- 5. A copy of Accusation and Petition to Revoke Probation No. 800-2015-012357 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

- 6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in the Accusation and Petition to Revoke Probation No. 800-2015-012357. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 7. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation and Petition to Revoke Probation; the right to be represented by counsel at her own expense; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

9. For the purposes of resolving the charges and allegations in the Accusation and Petition to Revoke Probation, without the expense and uncertainty of further proceedings, Respondent agrees that the charges and allegations in the Accusation and Petition to Revoke Probation in Case No. 800-2015-012357, if proven at hearing, constitute cause for discipline upon her Physician's and Surgeon's certificate and she agrees to be bound by the Board's imposition of discipline as set for in the Disciplinary Order below.

<u>RESERVATION</u>

10. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board of California or other professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

CONTINGENCY

- Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this Stipulation and settlement, without notice to or participation by Respondent or her counsel. By signing the Stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek to rescind the Stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this Stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.
- 12. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including Portable Document Format (PDF) and facsimile signatures thereto, shall have the same force and effect as the originals.

13. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A55830 issued to Respondent Julie Anne Winfield, M.D. (Respondent) is revoked. However, the revocation is stayed and Respondent is placed on probation for five (5) years on the following terms and conditions:

- 1. <u>REVOCATION & STAY ORDER</u>. Certificate No. A55830 issued to Respondent Julie Anne Winfield, M.D. is hereby revoked. Revocation is stayed and Respondent is placed on probation for five years upon the following terms and conditions.
- 2. <u>CONTROLLED SUBSTANCES MAINTAIN RECORDS AND ACCESS TO</u>

 <u>RECORDS AND INVENTORIES</u>. Respondent shall maintain a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed by Respondent, and any recommendation or approval which enables a patient or patient's primary caregiver to possess or cultivate marijuana for the personal medical purposes of the patient within the meaning of Health and Safety Code section 11362.5, during probation, showing all the following: 1) the name and address of patient; 2) the date; 3) the character and quantity of controlled substances involved; and 4) the indications and diagnosis for which the controlled substances were furnished.

Respondent shall keep these records in a separate file or ledger, in chronological order. All records and any inventories of controlled substances shall be available for immediate inspection and copying on the premises by the Board or its designee at all times during business hours and shall be retained for the entire term of probation.

- 3. <u>PRESCRIPTION RESTRICTION</u>. Respondent shall not prescribe, authorize, order, dispense, administer, or provide any dangerous drug or controlled substances to any member of Respondent's family or household.
- 4. <u>CONTROLLED SUBSTANCES ABSTAIN FROM USE</u>. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the

California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition.

Within 15 calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the following: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

If Respondent has a confirmed positive biological fluid test for any substance (whether or not legally prescribed) and has not reported the use to the Board or its designee, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of medicine. The Respondent shall not resume the practice of medicine until final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke probation shall be filed by the Board within 15 days of the notification to cease practice. If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or the Board within 15 days unless good cause can be shown for the delay. The cessation of practice shall not apply to the reduction of the probationary time period.

If the Board does not file an accusation or petition to revoke probation within 15 days of the issuance of the notification to cease practice or does not provide Respondent with a hearing within 30 days of a such a request, the notification of cease practice shall be dissolved.

5. <u>ALCOHOL - ABSTAIN FROM USE</u>. Respondent shall abstain completely from the use of products or beverages containing alcohol.

If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of medicine. The Respondent shall not resume the practice of medicine until final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke

probation shall be filed by the Board within 15 days of the notification to cease practice. If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent stipulates to a later hearing. A decision shall be received from the Administrative Law Judge or the Board within 15 days unless good cause can be shown for the delay. The cessation of practice shall not apply to the reduction of the probationary time period.

If the Board does not file an accusation or petition to revoke probation within 15 days of the issuance of the notification to cease practice or does not provide Respondent with a hearing within 30 days of a such a request, the notification of cease practice shall be dissolved.

6. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism program, that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.

Respondent shall participate in and successfully complete that program. Respondent shall provide any information and documents that the program may deem pertinent. Respondent shall successfully complete the classroom component of the program not later than six (6) months after Respondent's initial enrollment, and the longitudinal component of the program not later than the time specified by the program, but no later than one (1) year after attending the classroom component. The professionalism program shall be at Respondent's expense and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

A professionalism program taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the program would have been approved by the Board or its designee had the program been taken after the effective date of this Decision.

Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the program or not later than 15 calendar days after the effective date of the Decision, whichever is later.

7. CLINICAL DIAGNOSTIC EVALUATION/PSYCHIATRIC EVALUATION.

Within thirty (30) calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as may be required by the Board or its designee, Respondent shall undergo and complete a clinical diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed board certified physician and surgeon. The examiner shall consider any information provided by the Board or its designee and any other information he or she deems relevant, and shall furnish a written evaluation report to the Board or its designee.

The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of physicians and surgeons with substance abuse disorders, and is approved by the Board or its designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable professional standards for conducting substance abuse clinical diagnostic evaluations. The evaluator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and independent evaluation. The clinical diagnostic evaluation report shall set forth, in the evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a threat to himself or herself or others, and recommendations for substance abuse treatment, practice restrictions, or other recommendations related to Respondent's rehabilitation and ability to practice safely. If the evaluator determines during the evaluation process that Respondent is a threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24) hours of such a determination.

In formulating his or her opinion as to whether Respondent is safe to return to either parttime or full-time practice and what restrictions or recommendations should be imposed, including
participation in an inpatient or outpatient treatment program, the evaluator shall consider the
following factors: Respondent's license type; Respondent's history; Respondent's documented
length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);
Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical
history and current medical condition; the nature, duration and severity of Respondent's
substance abuse problem or problems; and whether Respondent is a threat to himself or herself or

the public.

For all clinical diagnostic evaluations, a final written report shall be provided to the Board no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator requests additional information or time to complete the evaluation and report, an extension may be granted, but shall not exceed thirty (30) days from the date the evaluator was originally assigned the matter.

The Board shall review the clinical diagnostic evaluation report within five (5) business days of receipt to determine whether Respondent is safe to return to either part-time or full-time practice and what restrictions or recommendations shall be imposed on Respondent based on the recommendations made by the evaluator. Respondent shall not be returned to practice until he or she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of Regulations. Respondent has satisfied the aforementioned 30-days of negative test results provision, provided that there is no new positive biological fluid test result following the signatory date of this Settlement Agreement.

Clinical diagnostic evaluations conducted prior to the effective date of this Decision shall not be accepted toward the fulfillment of this requirement. The cost of the clinical diagnostic evaluation, including any and all testing deemed necessary by the examiner, the Board or its designee, shall be borne by the licensee.

Respondent shall not engage in the practice of medicine until notified by the Board or its designee that he or she is fit to practice medicine safely. The period of time that Respondent is not practicing medicine shall not be counted toward completion of the term of probation. Respondent shall undergo biological fluid testing as required in this Decision at least two (2) times per week while awaiting the notification from the Board if he or she is fit to practice medicine safely.

Respondent shall comply with all restrictions or conditions recommended by the examiner conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified

by the Board or its designee, and shall cooperate fully and completely with the evaluation and the evaluator.

Over the course of probation, at the request of the Board or its designee, Respondent shall undergo and complete a psychiatric and/or substance abuse evaluation (and psychological testing, if deemed necessary) by a Board-appointed evaluator, who shall consider any information provided by the Board or designee and any other information the psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its designee. Psychiatric evaluations conducted prior to the effective date of the Decision shall not be accepted towards the fulfillment of this requirement. Respondent shall pay the cost of all psychiatric evaluations and psychological testing, and shall cooperate fully with the evaluation and the evaluator.

Respondent shall comply with all restrictions or conditions recommended by the evaluator within 15 calendar days after being notified by the Board or its designee.

8. PSYCHOTHERAPY.

Within 60 calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a California-licensed board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board or its designee deems that no further psychotherapy is necessary.

The psychotherapist shall consider any information provided by the Board or its designee and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board or its designee. Respondent shall cooperate in providing the psychotherapist any information and documents that the psychotherapist may deem pertinent.

Respondent shall have the treating psychotherapist submit quarterly status reports to the Board or its designee. The Board or its designee may require Respondent to undergo psychiatric evaluations by a Board-appointed board certified psychiatrist. If, prior to the completion of probation, Respondent is found to be mentally unfit to resume the practice of medicine without

restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that Respondent is mentally fit to resume the practice of medicine without restrictions.

Respondent shall pay the cost of all psychotherapy and psychiatric evaluations.

9. <u>NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION</u>. Within seven (7) days of the effective date of this Decision, Respondent shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's worksite monitor, and Respondent's employers and supervisors to communicate regarding Respondent's work status, performance, and monitoring.

For purposes of this section, "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff privileges.

10. BIOLOGICAL FLUID TESTING.

Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order a Respondent to undergo a biological fluid test on any day, at any time, including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis. The cost of biological fluid testing shall be borne by the Respondent.

During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing

be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced, observed, biological fluid testing and meets all the following standards:

- (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
 Association or have completed the training required to serve as a collector for the United States
 Department of Transportation.
- (b) Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines
- (c) Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test administered.
 - (d) Its specimen collectors observe the collection of testing specimens.
- (e) Its laboratories are certified and accredited by the United States Department of Health and Human Services.
- (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.
- (g) Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.
- (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.
 - (i) It maintains testing sites located throughout California.
- (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line computer database that allows the Respondent to check in daily for testing.

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(k) It maintains a secure, HIPAA-compliant website or computer system that allows staff access to drug test results and compliance reporting information that is available 24 hours a day.

- (l) It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.
- (m) It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if the Respondent holds a valid prescription for the substance.

Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

The contract shall require that the laboratory directly notify the Board or its designee of non-negative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself or herself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited substance use exists, the Board shall lift the cease-practice order within one (1) business day.

After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his or her treating

physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance the Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself or herself.

If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent's rehabilitation.

11. SUBSTANCE ABUSE SUPPORT GROUP MEETING.

Within thirty (30) days of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its prior approval, the name of a substance abuse support group which he or she shall attend for the duration of probation. Respondent shall attend substance abuse support group meetings at least once per week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse support group meeting costs.

The facilitator of the substance abuse support group meeting shall have a minimum of three (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state or nationally certified organizations. The facilitator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. Respondent's previous participation in a substance abuse group support meeting led by the same facilitator does not constitute a prohibited current or former financial, personal, or business relationship.

The facilitator shall provide a signed document to the Board or its designee showing Respondent's name, the group name, the date and location of the meeting, Respondent's attendance, and Respondent's level of participation and progress. The facilitator shall report any

unexcused absence by Respondent from any substance abuse support group meeting to the Board, or its designee, within twenty-four (24) hours of the unexcused absence.

12. <u>WORKSITE MONITOR</u>. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring the Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; Respondent's actions; and

any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance; (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by Respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, Respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring responsibility.

13. <u>VIOLATION OF PROBATION CONDITION</u>.

Failure to fully comply with any term or condition of probation is a violation of probation.

- A. If Respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
 - (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1),

of Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice order issued by the Board or its designee shall state that Respondent must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice. For purposes of the determining the length of time a Respondent must test negative while undergoing continuous biological fluid testing following issuance of a cease-practice order, a month is defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until notified in writing by the Board or its designee that he or she may do so.

- (2) Increase the frequency of biological fluid testing.
- (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or other action as determined by the Board or its designee. (Cal. Code Regs., tit. 16, § 1361.52, subd. (b).)
- B. If Respondent commits a minor violation of probation as defined by section 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
 - (1) Issue a cease-practice order;
 - (2) Order practice limitations;
 - (3) Order or increase supervision of Respondent;
 - (4) Order increased documentation;
 - (5) Issue a citation and fine, or a warning letter;
 - (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense;
 - (7) Take any other action as determined by the Board or its designee. (Cal. Code Regs., tit. 16, § 1361.52, subd. (d).)
- C. Nothing in this Decision shall be considered a limitation on the Board's authority to revoke Respondent's probation if he or she has violated any term or condition of probation. (See Cal. Code Regs., tit. 16, § 1361.52, subd. (e).) If Respondent violates probation in any respect,

the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

14. <u>NOTIFICATION</u>. Within seven (7) days of the effective date of this Decision, the Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days.

This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

- 15. <u>SUPERVISION OF PHYSICIAN ASSISTANTS</u>. During probation, Respondent is prohibited from supervising physician assistants.
- 16. <u>OBEY ALL LAWS</u>. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.
- 17. <u>QUARTERLY DECLARATIONS</u>. Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

18. GENERAL PROBATION REQUIREMENTS.

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit and all terms and conditions of this Decision.

Address Changes

Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

Place of Practice

Respondent shall not engage in the practice of medicine in Respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal

Respondent shall maintain a current and renewed California physician's and surgeon's license.

Travel or Residence Outside California

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event Respondent should leave the State of California to reside or to practice Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

- 19. <u>INTERVIEW WITH THE BOARD OR ITS DESIGNEE</u>. Respondent shall be available in person upon request for interviews either at Respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.
- 20. <u>NON-PRACTICE WHILE ON PROBATION</u>. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine in California as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month

in direct patient care, clinical activity or teaching, or other activity as approved by the Board. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete a clinical training program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two (2) years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; and General Probation Requirements.

- 21. <u>COMPLETION OF PROBATION</u>. Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Respondent's certificate shall be fully restored.
- 22. <u>LICENSE SURRENDER</u>. Following the effective date of this Decision, if
 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
 the terms and conditions of probation, Respondent may request to surrender his or her license.
 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
 determining whether or not to grant the request, or to take any other action deemed appropriate
 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
 to the terms and conditions of probation. If Respondent re-applies for a medical license, the

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: 1/8/2016

Respectfully submitted,

KAMALA D. HARRIS Attorney General of California JANE ZACK SIMON Supervising Deputy Attorney General

MACHAELA M. MINGARDI Deputy Attorney General Attorneys for Complainant

SF2015401024 Winfield Settlement Agreement Final.docx

Exhibit A

Accusation & Petition to Revoke Probation No. 800-2015-012357

1	Kamala D. Harris	FILED STATE OF CALIFORNIA		
2	JANE ZACK SIMON	CRAMENTO APELL 21, 2015		
3	Supervising Deputy Attorney General Machaela M. Mingardi	THEILILAIC ANALYST		
4	Deputy Attorney General State Bar No. 194400			
5	455 Golden Gate Avenue, Suite 11000 San Francisco, CA 94102-7004			
6	Telephone: (415) 703-5696 Facsimile: (415) 703-5480			
7	Attorneys for Complainant			
8	MEDICAL BOARD O	BEFORE THE MEDICAL BOARD OF CALIFORNIA		
9		DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA		
10				
11	In the Matter of the Accusation and Petition to Revoke Probation Against,	ase No. 8002015012357		
12	JULIE ANNE WINFIELD, M.D.	CCUSATION AND PETITION TO		
13	1 5 Mallord Pood	EVOKE PROBATION		
14	Physician's and Surgeon's Certificate No.			
15	A55830			
16	Respondent.			
17				
18	Complainant alleges:			
19	PARTI			
20	1. Kimberly Kirchmeyer (Complainant) brings this Accusation and Petition to Revoke			
21	Probation solely in her official capacity as the Executive Director of the Medical Board of			
22	California, Department of Consumer Affairs.			
23	2. On or about March 13, 1996, the Medical Board of California issued Physician's and			
24	Surgeon's Certificate No. A55830 to Julie Anne Winfield (Respondent). Said certificate is			
25	renewed and current with an expiration date of May 31, 2015.			
26	3. In a disciplinary action entitled "In the	3. In a disciplinary action entitled "In the Matter of the Accusation Against Julie Anne		
27	Winfield," Case No. 03-2008-196387, the Medical Board of California, issued a decision,			
28	effective June 14, 2010, in which Respondent's Physician's and Surgeon's Certificate No.			
1	1			

A55830 was revoked. However, the revocation was stayed and Respondent was placed on probation for a period of five (5) years with certain terms and conditions, including a prohibition on the use of controlled substances and alcohol. A copy of that decision is attached as Exhibit A and is incorporated by reference.

JURISDICTION

- 4. This Accusation and Petition to Revoke Probation is brought before the Medical Board of California (Board), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
 - 5. Section 2004 of the Code states, in relevant part:

"The board shall have the responsibility for the following:

- "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice Act.
 - "(b) The administration and hearing of disciplinary actions.
- "(c) Carrying out disciplinary actions appropriate to findings made by a panel or an administrative law judge.
- "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of disciplinary actions.
- "(e) Reviewing the quality of medical practice carried out by physician and surgeon certificate holders under the jurisdiction of the board."
- 6. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, or such other action taken in relation to discipline as the Board deems proper.
 - 7. Section 2228 of the Code states:

"The authority of the board . . . to discipline a licensee by placing him or her on probation includes, but is not limited to, the following:

2.7

- (a) Requiring the licensee to obtain additional professional training and to pass an examination upon the completion of the training. The examination may be written or oral, or both, and may be a practical or clinical examination, or both, at the option of the board or division or the administrative law judge.
- (b) Requiring the licensee to submit to a complete diagnostic examination by one or more physicians and surgeons appointed by the board. If an examination is ordered, the board shall receive and consider any other report of a complete diagnostic examination given by one or more physicians and surgeons of the licensee's choice.
- (c) Restricting or limiting the extent, scope, or type of practice of the licensee, including requiring notice to applicable patients that the licensee is unable to perform the indicated treatment, where appropriate"
- 8. Section 2229 of the Code states that the protection of the public shall be the highest priority for the Board in exercising their disciplinary authority. While attempts to rehabilitate a licensee should be made when possible, Section 2229(c) states that when rehabilitation and protection are inconsistent, protection shall be paramount.
 - 9. Section 2234 of the Code states, in relevant part:

"The Board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter [Chapter 5, the Medical Practice Act].

. . . .

- (e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon."
- 10. Section 2239 of the Code provides that it is unprofessional conduct for a licensee to use, prescribe for or administer to herself any controlled substance. Section 2239 further provides

that it is unprofessional conduct to use any dangerous drugs as specified in Section 4022, or alcohol, to the extent that such use impairs the ability of the licensee to practice medicine safely.

11. Section 822 of the Code states that:

"If a licensing agency determines that it's licentiate's ability to practice his or her profession safely is impaired because the licentiate is mentally ill, or physically ill affecting competency, the licensing agency may take action by any one of the following methods:

- (a) Revoking the licentiate's certificate or license.
- (b) Suspending the licentiate's right to practice.
- (c) Placing the licentiate on probation.
- (d) Taking such other action in relation to the licentiate as the licensing agency in its discretion deems proper.

The licensing agency shall not reinstate a revoked or suspended certificate or license until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's right to practice his or her profession may be safely reinstated."

- 12. Health and Safety Code section 11170 prohibits prescribing, administering or furnishing a controlled substance for self use.
- 13. Health and Safety Code section 11173 provides that no person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure the administration of or prescription for controlled substances by fraud, deceit, misrepresentation or subterfuge or by the concealment of a material fact.
- 14. The Board's Decision regarding Respondent in Case No. 03-2008-196387, effective June 14, 2010, contains the following provision (Condition 20): "Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during

probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final."

FIRST CAUSE FOR DISCIPLINE

(Unprofessional Conduct: Use of Controlled Substances/Dangerous Drugs/Alcohol)

- 15. Respondent specializes in dermatology. At all times pertinent to this Accusation and Petition to Revoke Probation, Respondent was engaged in the solo practice of dermatology in Marin County.
- 16. On October 2009, in Case No. 03-2008-196387, an Accusation was filed against Respondent alleging the following: During a three year period, Respondent wrote numerous prescriptions for four controlled substances Ambien¹, Xanax², Provigil³ and Phentermine⁴ in the names of her parents, filled the prescriptions at various pharmacies, and took the drugs herself. In November 2009, Respondent was arrested for driving under the influence and was eventually convicted of driving under the influence of a controlled substance as a misdemeanor. Even after her arrest, Respondent continued to self-prescribe.
- 17. On June 14, 2010, the Board issued a decision in Case No. 03-2008-196387 and Respondent's probation went into effect. Respondent's probation included several terms and conditions, including Condition 3, which states that "Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications

Ambien, a trade name for zolpidem tartrate, is a non-benzodiazepine sedative-hypnotic. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance as defined by section 11057 of the Health and Safety Code and section 1308.14 of Title 21 of the Code of Federal Regulations.

² Xanax, a trade name for alprazolam tablets, possesses hypnotic properties. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance as defined by section 11057 of the Health and Safety Code and section 1308.14 of Title 21 of the Code of Federal Regulations.

³ <u>Provigil</u>, a trade name for Modafinil, is a stimulant. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance and Narcotic as defined by section 11057 of the Health and Safety Code and section 1308.14 of Title 21 of the Code of Federal Regulations.

⁴ <u>Phentermine</u> is a psychostimulant drug with pharmacology similar to amphetamine. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance and Narcotic as defined by section 11057 of the Health and Safety Code and section 1308.14 of Title 21 of the Code of Federal Regulations.

lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition. Within 15 calendar days of receiving any lawful prescription medications, Respondent shall notify the Board or its designee of the issuing practitioner's name, address and telephone number; medication name and strength; and issuing pharmacy name, address and telephone number. Respondent shall abstain completely from the use of products or beverages containing alcohol."

- 18. In October 2013, Respondent's urine tested positive for Ketamine⁵, which is a sedative/anesthetic. In November 2013 and again in February 2014, Respondent's urine tested positive for Tramadol⁶, an opiate pain medication. When questioned about the positive test results, Respondent denied taking any of these medications. She stated that she might have come into contact with Tramadol when she was assisting her ailing father in Florida, but she later stated that she might have come into contact with the drug because her dog was taking it. Respondent failed to produce a prescription for Tramadol for her dog.
- 19. In March 2014, Respondent's urine tested positive for Temazepam⁷ (a benzodiazepine), Oxycodone⁸ and Oxymorphone⁹ (opiates). The results also were positive for ethyl glucuronide (EtG) and ethyl sulfate (EtS), both alcohol biomarkers. Respondent again denied taking any of these medications and said she did not drink alcohol. She claimed that each of these positive urine test results were wrong. Controlled Substance Utilization Review and Evaluation System (CURES) reports show that Respondent had not received a prescription for these medications.

⁵ <u>Ketamine</u> is a rapid-acting injectable anesthetic. It is a dangerous drug as defined in section 4022 and a Schedule III controlled substance as defined by section 11056 of the Health and Safety Code and section 1308.13 of Title 21 of the Code of Federal Regulations.

⁶ <u>Tramadol</u> is an opioid pain medication and a dangerous drug as defined in section 4022. It became a Schedule IV controlled substance as defined by section 11057 of the Health and Safety Code and section 1308.14 of Title 21 of the Code of Federal Regulations in August of 2014.

⁷ <u>Temazepam</u> is a hypnotic agent. It is a dangerous drug as defined in section 4022 and a Schedule IV controlled substance and Narcotic as defined by section 11057 of the Health and Safety Code and section 1308.14 of Title 21 of the Code of Federal Regulations.

⁸ Oxycodone is a narcotic analgesic with multiple actions qualitatively similar to morphine. It is a dangerous drug as defined in section 4022 and a Schedule II controlled substance as defined by section 11055 of the Health and Safety Code and section 1308.12 of Title 21 of the Code of Federal Regulations.

⁹ Oxymorphone is an opioid analgesic. It is a dangerous drug as defined in section 4022 and a Schedule II controlled substance as defined by section 11055 of the Health and Safety Code and section 1308.12 of Title 21 of the Code of Federal Regulations.

- 20. During a 350-day period from November 2012 to November 2013, CURES reports show that Respondent was prescribed 1,090 tablets of Ambien, mostly by her primary care physician (PCP) who was not aware that Respondent was on probation for a substance abuse problem or that she had abused Ambien in the past. Once the PCP was informed of the situation, the PCP discontinued prescribing to Respondent.
- 21. Respondent then turned to her endocrinologist who continued to prescribe her Ambien. Respondent did not advise him of her substance abuse history.
- 22. Respondent's treating addiction psychiatrist, Dr. T.C, was unaware that Respondent was receiving Ambien. He was also unaware that Respondent was prescribed the stimulant Phentermine.
- 23. In July of 2014, at the Board's request, Respondent underwent an evaluation by L.B, M.D., a psychiatrist who specializes in addiction medicine. Respondent unequivocally stated to Dr. L.B. that she is not an addict and that she does not have a problem with substance abuse. In March of 2015, Dr. L.B. concluded that Respondent meets diagnostic criteria for sedative hypnotic use disorder, severe, and polysubstance abuse, and that she had "found ways to subvert the prohibition on controlled substances" during her probation. Dr. L.B. concluded that if Respondent continued taking substances that can impair her judgment she could be a danger to the public, and that taking high doses of sedatives means that residual amounts in her bloodstream during the day could impair her judgment.
- 24. Respondent's conduct in self-administering controlled substances, and/or using controlled substances and/or alcohol in violation of her probation, and/or obtaining controlled substances by fraud, deceit, misrepresentation, subterfuge or by the concealment of a material fact as alleged above constitutes unprofessional conduct and is cause for discipline pursuant to Business and Professions Code sections 822 and/or 2229 and/or 2234, and/or 2239; and/or Health and Safety code sections 11170 and/or 11173.

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CAUSE TO REVOKE PROBATION

(Abstain from Use of Controlled Substances/Dangerous Drugs/Alcohol)

- 25. The allegations in the First Cause for Discipline are incorporated herein by reference as if fully set forth.
- 26. Respondent's probation is subject to revocation because she failed to comply with Probation Conditions 3 and 20, as set forth above. As previously described, during her probationary term, Respondent's urine tested positive for Ketamine, Tramadol, Temazepam, Oxycodone, Oxymorphone, and alcohol metabolites ethyl glucuronide/ethyl sulfate. Respondent denied taking any of these medications or drinking alcohol. She gave inconsistent and incredible theories as to why she tested positive for some of the drugs. She claimed the other test results were all wrong.
- 27. Respondent was prescribed Phentermine and large quantities of Ambien by her PCP whom she failed to inform that she was on probation for substance abuse or that she had a history of abusing Ambien and Phentermine. When Respondent's PCP was informed by Respondent's Probation Officer of the situation, Respondent went to her endocrinologist for more Ambien. She never informed him of her probation or substance abuse problem.
- 28. Respondent's treating addiction psychiatrist, Dr. T.C., was unaware that Respondent was receiving Ambien. He was also unaware that Respondent was prescribed the stimulant Phentermine.
- 29. In July of 2014, at the Board's request, Respondent underwent an evaluation by L.B, M.D., a psychiatrist who specializes in addiction medicine. In March of 2015, Dr. L.B. concluded that Respondent meets diagnostic criteria for sedative hypnotic use disorder, severe, and polysubstance abuse, and that she had "found ways to subvert the prohibition on controlled substances" during her probation. Dr. L.B concluded that if Respondent continued taking substances that can impair her judgment she could be a danger to the public, and that taking high doses of sedatives means that residual amounts in her bloodstream during the day could impair her judgment.

30. Respondent is subject to disciplinary action and probation revocation for violating Conditions 3 and 20 of her probation in that she self-administered controlled substances, and/or she used controlled substances and/or alcohol in violation of her probation, and/or she obtained Phentermine and large quantities of Ambien without disclosing to her doctors that she was on probation for substance abuse and/or that she had a past history of abusing these drugs.

DISCIPLINE CONSIDERATIONS

31. To determine the degree of discipline, if any, to be imposed on Respondent, Complainant alleges that on or about August 19, 2009, in a prior criminal proceeding in Marin County Superior Court, Respondent was convicted of a misdemeanor violation of Vehicle Code section 23152(a) (driving under the influence of a controlled substance). Respondent's conviction constituted unprofessional conduct and the conviction of a crime substantially related to the qualifications, functions or duties of a physician and surgeon. The record of the criminal proceeding is incorporated as if fully set forth.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

- 1. Revoking the probation that was granted by the Medical Board of California in Case No. 03-2008-196387 and imposing the disciplinary order that was stayed thereby revoking Physician and Surgeon's Certificate No. A55830 issued to Julie Anne Winfield;
- 2. Revoking or suspending Physician and Surgeon's Certificate No. A55830, issued to Julie Anne Winfield;
- 3. Revoking, suspending or denying approval of Julie Anne Winfield's authority to supervise physician's assistants, pursuant to section 3527 of the Code;
- 4. Ordering Julie Anne Winfield to pay the Medical Board of California, if placed on probation, the costs of probation monitoring;

1	5. Taking such other and furt	her action as deemed necessary and proper.
2		
3	April 21, 2015	
4	DATED:	KIMBERLY KIRCHMEYER
5		Executive Director Medical Board of California
6		Department of Consumer Affairs State of California
7		Complainant
8	SF2015401024	
9	41250945.doc	
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Exhibit A

Decision and Order

Medical Board of California Case No. 03-2008-196387

BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Second Amended Accusation Against:)		
JULIE ANNE WINFIELD, M.D.) .	File No.	03-2008-196387
Physician's and Surgeon's Certificate No. A 55830)		
Respondent.)) _)		

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Medical Board of California, Department of Consumer Affairs, State of California, as its Decision in this matter.

MEDICAL BOARD OF CALIFORNIA

Hedy Chang, Chair

Panel B

1	EDMUND G. BROWN JR. Attorney General of California		
2	Jose R. Guerrero Supervising Deputy Attorney General		
3	JANE ZACK SIMON Deputy Attorney General		
4	State Bar No. 116564 455 Golden Gate Avenue, Suite 11000		
5	San Francisco, CA 94102-7004 Telephone: (415) 703-5544		
6	Fax: (415) 703-5480 E-mail: Janezack.simon@doj.ca.gov		
7	Attorneys for Complainant Medical Board of California		
8	BEFORE	THE	
9	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS		
10	STATE OF CA	LIFORNIA	
11		Case No. 03-2008-196387	
12	In the Matter of the Accusation Against:	ase No. 03-2000-17030/	
13		TIPULATED SETTLEMENT AND	
14	770 Tamalpias Drive, Suite 402 Corte Madera, CA 94925	DISCIPLINARY ORDER	
15	Physician's and Surgeon's Certificate No. A55830		
16		·	
17	Respondent.		
18		D. ACDEED has and between the parties to the	
19		D AGREED by and between the parties to the	
20	above-entitled proceedings that the following matt		
21		nant) is the Interim Executive Director of the	
22	Medical Board of California. This action has at all times been brought and maintained in the		
23	official capacity of the Medical Board's Executive Director. Complainant is represented in this		
24	matter by Edmund G. Brown Jr., Attorney General of the State of California, by Jane Zack		
	Simon, Deputy Attorney General.		
25	///		
26	1//		
27	111		
28	1		
	Stipulated Settlement and Disciplinary Order (03-2008-196387)		
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- 2. Julie Anne Winfield, M.D. (respondent) is represented by Ivan Weinberg of Weinberg Hoffman, LLP, 900 Larkspur Landing Circle, Suite 155, Larkspur, CA 94939.
- 3. On or about March 13, 1996, the Medical Board of California issued Physician's and Surgeon's Certificate No. A55830 to respondent. Said certificate is renewed and current with an expiration date of May 31, 2011.
- 4. Accusation No. 03-2008-196387 was duly filed before the Medical Board of California ("Board"), and is currently pending against respondent. The Accusation and all other statutorily required documents were properly served on respondent and respondent timely filed a Notice of Defense contesting the Accusation. A copy of Accusation No. 03-2008-196387 is attached as exhibit A and incorporated herein by reference.
- 5. Respondent has carefully read, fully discussed with her counsel and understands the charges and allegations in Accusation No. 03-2008-196387. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 6. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to be represented by counsel at her own expense; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.
- 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.
- 8. Respondent admits that complainant could establish a *prima facie* case with respect to the charges and allegations set forth in the Accusation. Respondent agrees that her Physician's and Surgeon's Certificate is subject to discipline and she agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

1. Controlled Substances-Maintain Records and Access to Records and Inventories:

Respondent shall maintain a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed by respondent, and any recommendation or approval issued pursuant to Health and Safety Code section 11362.5, during probation, showing all the following: 1) the name and address of patient; 2) the date; 3) the character and quantity of controlled substances involved; and 4) the indications and diagnosis for which the controlled substances were furnished. Respondent shall keep these records in a separate file or ledger, in chronological order. All records and any inventories of controlled substances shall be available for immediate inspection and copying on the premises by the Board or its designee at all times during business hours and shall be retained for the entire term of probation. Failure to maintain all records, to provide immediate access to the inventory, or to make all records available for immediate inspection and copying on the premises, is a violation of probation

2. <u>Prescription Restriction:</u>

Respondent shall not prescribe, authorize, order, dispense, administer, or provide any dangerous drug or controlled substances to any member of respondent's family or household.

3. Controlled Substances /Dangerous Drugs/Alcohol- Abstain From Use:

Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed to respondent by another practitioner for a bona fide illness or condition. Within 15 calendar days of receiving any lawful prescription medications, respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name and strength; and issuing

pharmacy name, address, and telephone number. Respondent shall abstain completely from the use of products or beverages containing alcohol.

4. Biological Fluid Testing:

Respondent shall immediately submit to biological fluid testing, at respondent's expense, upon the request of the Board or its designee. A certified copy of any laboratory test results may be received in evidence in any proceedings between the Board and the respondent. Failure to submit to, or failure to complete the required biological fluid testing, is a violation of probation.

5. Community Service:

Within 60 calendar days of the effective date of this Decision, respondent shall submit to the Board or its designee for prior approval a community service plan in which respondent shall during each year of probation, provide 40 hours of free services to a community or non-profit organization. Prior to engaging in any community service respondent shall provide a true copy of the Decision(s) to the chief of staff, director, office manager, program manager, officer, or the chief executive officer at every community or non-profit organization where respondent provides community service, and shall submit proof of compliance to the Board or its designee within 15 calendar days. This condition shall also apply to any change(s) in community service. Community service performed prior to the effective date of the Decision shall not be accepted in fulfillment of this condition.

6. <u>Prescribing Practices Course:</u>

Within 60 calendar days of the effective date of this Decision, respondent shall enroll in a course in prescribing practices, at respondent's expense, approved in advance by the Board or its designee. Failure to successfully complete the course during the first 6 months of probation is a violation of probation. A prescribing practices course taken after the acts that gave

rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision. Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the course, or not later than 15 calendar days after the effective date of the Decision, whichever is later.

7. Ethics Course:

Within 60 calendar days of the effective date of this Decision, respondent shall enroll in a course in ethics, at respondent's expense, approved in advance by the Board or its designee. The course must meet the requirements of 16 California Code of Regulations section 1358.1. Failure to successfully complete the course during the first year of probation is a violation of probation. Successful completion of the Institute for Medical Quality "Professionalism Program" will constitute acceptable compliance with this requirement. An ethics course taken after the acts that gave rise to the charges in the Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the course would have been approved by the Board or its designee had the course been taken after the effective date of this Decision. Respondent shall submit a certification of successful completion to the Board or its designee not later than 15 calendar days after successfully completing the course, or not later than 15 calendar days after the effective date of the Decision, whichever is later.

8. <u>Psychiatric Evaluation:</u>

Respondent shall undergo and complete a psychiatric evaluation (and psychological testing, if deemed necessary) by a Board-appointed board certified psychiatrist,

who shall consider any information provided by the Board or its designee and any other information the psychiatrist deems relevant, and shall furnish a written evaluation report to the Board or its designee. The Board may, in its sole discretion, accept a psychiatric evaluation performed prior to the effective date of the Decision in satisfaction of this requirement. In addition to the terms and conditions set forth in this Stipulated Settlement, respondent shall comply with all restrictions or conditions recommended by the evaluating psychiatrist within 15 calendar days after being notified by the Board or its designee. Failure to undergo and complete a psychiatric evaluation and psychological testing, or comply with any required additional conditions or restrictions, is a violation of probation. During the course of probation, and on such a periodic basis as may be required by the Board or its designee, Respondent shall undergo and complete additional psychiatric evaluation(s). During any psychiatric evaluation(s) Respondent shall cooperate fully with the evaluator, and shall provide the evaluator with access to any information, records or documents that the evaluator may deem pertinent or necessary.

Respondent shall pay the cost of all psychiatric evaluations and psychological testing.

9. Psychotherapy:

Within 30 days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval the name and qualifications of a board-certified psychiatrist. Upon approval, Respondent shall undergo and continue psychiatric treatment throughout the course of probation. Respondent shall undergo and continue psychiatric treatment on an at least weekly basis for at least the first year of probation. Thereafter, the frequency or mode of psychotherapy may be modified as recommended by the treating psychiatrist and approved in advance by the Board or its designee. Respondent shall have the treating psychiatrist submit quarterly status reports to the Board or its designee. The psychiatrist shall notify the Board or its designee immediately if the psychiatrist believes at any time that Respondent cannot

continue to safely practice or if Respondent has not complied with treatment and medication recommendations. In such an event, Respondent authorizes and releases the psychiatrist to communicate with the Board or its designee and to provide any information the Board deems appropriate. Respondent's approved psychotherapist will not function in any additional roles and will be ineligible to serve as Respondent's practice monitor. If, prior to the completion of probation, Respondent is found to be mentally unfit to resume the practice of medicine without restrictions, the Board shall retain continuing jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines that the Respondent is mentally fit to resume the practice of medicine without restrictions. Respondent shall pay the cost of all psychotherapy. Failure to undergo and continue psychotherapy treatment, or to comply with any required modification in the frequency of psychotherapy, is a violation of probation.

10. Practice Monitor:

Within 30 calendar days of the effective date of this Decision, respondent shall submit to the Board or its designee for prior approval as a practice monitor, the name and qualifications of one or more licensed physicians and surgeons whose licenses are valid and in good standing, and who are preferably American Board of Medical Specialties (ABMS) certified. A monitor shall have no prior or current business or personal relationship with respondent, or other relationship that could reasonably be expected to compromise the ability of the monitor to render fair and unbiased reports to the Board, including but not limited to any form of bartering, shall be in respondent's field of practice, and must agree to serve as respondent's monitor. Respondent shall pay all monitoring costs. The Board or its designee shall provide the approved monitor with copies of the Decision(s) and Accusation(s), and a proposed monitoring plan. Within 15 calendar days of receipt of the Decision(s), Accusation(s), and proposed monitoring plan, the monitor shall submit a signed statement that the monitor has read the Decision(s) and Accusation(s), fully understands the role of a monitor, and agrees or disagrees with the proposed monitoring plan. If the monitor disagrees with the proposed monitoring plan, the monitor shall

submit a revised monitoring plan with the signed statement. Within 60 calendar days of the effective date of this Decision, and continuing throughout probation, respondent's practice shall be monitored by the approved monitor. Respondent shall make all records available for immediate inspection and copying on the premises by the monitor at all times during business hours and shall retain the records for the entire term of probation. The monitor shall submit a quarterly written report to the Board or its designee which includes an evaluation of respondent's performance, indicating whether respondent's practices are within the standards of practice of medicine, and whether respondent is practicing medicine safely. It shall be the sole responsibility of respondent to ensure that the monitor submits the quarterly written reports to the Board or its designee within 10 calendar days after the end of the preceding quarter. If the monitor resigns or is no longer available, respondent shall, within 5 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within 15 calendar days. If respondent fails to obtain approval of a replacement monitor within 60 days of the resignation or unavailability of the monitor, respondent shall be suspended from the practice of medicine until a replacement monitor is approved and prepared to assume immediate monitoring responsibility. Respondent shall cease the practice of medicine within 3 calendar days after being so notified by the Board or designee. Failure to maintain all records, or to make all appropriate records available for immediate inspection and copying on the premises, or to comply with this condition as outlined above is a violation of probation.

11. Notification:

Prior to engaging in the practice of medicine, the respondent shall provide a true copy of the Decision(s) and Accusation(s) to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to respondent, at any other facility where respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to respondent. Respondent shall submit proof of

compliance to the Board or its designee within 15 calendar days. This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

12. Supervision of Physician Assistants:

During probation, respondent is prohibited from supervising physician assistants.

13. Obey all Laws:

Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California, and remain in full compliance with any court ordered criminal probation, payments and other orders.

14. Quarterly Declarations:

Respondent shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation. Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

15. Probation Unit Compliance:

Respondent shall comply with the Board's probation unit. Respondent shall, at all times, keep the Board informed of respondent's business and residence addresses. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b). Respondent shall not engage in the practice of medicine in respondent's place of residence. Respondent shall maintain a current and renewed California physician's and surgeon's license. Respondent shall immediately inform the Board, or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than 30 calendar days.

16. Interview With the Board, or its Designee:

Respondent shall be available in person for interviews either at respondent's place of business or at the probation unit office, with the Board or its designee, upon request at various intervals, and either with or without prior notice throughout the term of probation.

17. Residing or Practicing Out-of-State:

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In the event respondent should leave the State of California to reside or to practice, respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return. Non-practice is defined as any period of time exceeding 30 calendar days in which respondent is not engaging in any activities defined in Sections 2051 and 2052 of the Business and Professions Code. All time spent in an intensive training program outside the State of California which has been approved by the Board or its designee shall be considered as time spent in the practice of medicine within the State. A Board-ordered suspension of practice shall not be considered as a period of non-practice. Periods of temporary or permanent residence or practice outside California will not apply to the reduction of the probationary term. Periods of temporary or permanent residence or practice outside California will relieve respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; Probation Unit Compliance; and Cost Recovery. Respondent's license shall be automatically canceled if respondent's periods of temporary or permanent residence or practice outside California total two years. However, respondent's license shall not be canceled as long as respondent is residing and practicing medicine in another state of the United States and is on active probation with the medical licensing authority of that state, in which case the two year period shall begin on the date probation is completed or terminated in that state. Any respondent disciplined under Business and Professions Code sections 141(a) or 2305 (out of state discipline) may petition for modification or termination of penalty: 1) if the other state's discipline terms are modified, terminated or reduced; and, 2) if at least one year has elapsed from the effective date of the California discipline.

18. Failure to Practice Medicine - California Resident:

In the event respondent resides in the State of California and for any reason respondent stops practicing medicine in California, respondent shall notify the Board or its designee in writing within 30 calendar days prior to the dates of non-practice and return to practice. Any period of non-practice within California, as defined in this condition, will not apply

to the reduction of the probationary term and does not relieve respondent of the responsibility to comply with the terms and conditions of probation. Non-practice is defined as any period of time exceeding 30 calendar days in which respondent is not engaging in any activities defined in sections 2051 and 2052 of the Business and Professions Code. All time spent in an intensive training program which has been approved by the Board or its designee shall be considered time spent in the practice of medicine. For purposes of this condition, non-practice due to a Board-ordered suspension or in compliance with any other condition of probation, shall not be considered a period of non-practice. Respondent's license shall be automatically canceled if respondent resides in California and for a total of two years, fails to engage in California in any of the activities described in Business and Professions Code sections 2051 and 2052.

19. <u>Completion of Probation:</u>

Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, respondent's certificate shall be fully restored.

20. <u>Violation of Probation:</u>

Failure to fully comply with any term or condition of probation is a violation of probation. If respondent violates probation in any respect, the Board, after giving respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, Petition to Revoke Probation, or an Interim Suspension Order is filed against respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

21. License Surrender:

Following the effective date of this Decision, if respondent ceases practicing due to retirement, health reasons or is otherwise unable to satisfy the terms and conditions of probation, respondent may request the voluntary surrender of respondent's license. The Board reserves the right to evaluate respondent's request and to exercise its discretion whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, respondent shall within 15 calendar

days deliver respondent's wallet and wall certificate to the Board or its designee and respondent shall no longer practice medicine. Respondent will no longer be subject to the terms and conditions of probation and the surrender of respondent's license shall be deemed disciplinary action. If respondent re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

22. Probation Monitoring Costs:

Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which are currently set at \$3,173.00, but may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year. Failure to pay costs within 30 calendar days of the due date is a violation of probation.

ACCEPTANCE

I have carefully read the Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: March 31, 2010

Julie Anne Winfield, M.D.

Respondent

Respondent

I have read and fully discussed with respondent, Julie Anne Winfield, MD the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: March 31, 2010

IVAN WEINBERG Weinberg Hoffman, LLP

Attorneys for Respondent

ENDORSEMENT The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California. 4/13/2010 Dated: Respectfully Submitted, EDMUND G. BROWN JR. Attorney General of California Deputy Attorney General Attorneys for Complainant

1	EDMUND G. BROWN JR. Attorney General of California
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3	JANE ZACK SIMON Deputy Attorney General SACRAMENTO October 29, 20 00
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7	Attorneys for Complainant Medical Board of California
8	BEFORE THE
9	MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS
10	STATE OF CALIFORNIA
11	
12	In the Matter of the Accusation Against: Case No. 03-2008-196387
13	
14	JULIE ANNE WINFIELD, M.D 770 TAMALPIAS DRIVE, SUITE 402 ACCUSATION
15	Corte madera, ca 94925
16	Physician's and Surgeon's Certificate No. A55830
17	
18	Complainant alleges:
19	PARTIES
20	1. Barbara Johnston ("Complainant") brings this Accusation solely in her official
21	capacity as the Executive Director of the Medical Board of California, Department of Consumer
22	Affairs.
23	2. On or about March 13, 1996, the Medical Board of California issued Physician's and
24	Surgeon's Certificate Number A55830 to Julie Anne Winfield, M.D. ("Respondent"). Said
25	certificate is renewed and current, with an expiration date of May 31, 2011.
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JURISDICTION

- 3. This Accusation is brought before the Medical Board of California¹ ("Board"), Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
 - A. Section 2227 of the Code provides that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked or suspended for a period not to exceed one year; or the licensee may be placed on probation and may be required to pay the costs of probation monitoring or may have such other action taken in relation to discipline as the Board deems proper.
 - B. Section 2234 of the Code provides that the Medical Board shall take action against any licensee who is charged with unprofessional conduct. Unprofessional conduct includes, but is not limited to:
 - "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate, any provision of this chapter [Chapter 5, the Medical Practice Act].
 - C. Section 2236 of the Code provides that the conviction of any offense substantially related to the qualifications, functions, or duties of a physician and surgeon constitutes unprofessional conduct.
 - D. Section 2238 of the Code provides that a violation of any federal statute or federal regulation or any of the statutes or regulations of this state regarding dangerous drugs or controlled substances constitutes unprofessional conduct.
 - E. Section 2239 of the code provides that the use or prescribing for or administering to him or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely, or self-

¹ The term "Board" means the Medical Board of California. "Division of Medical Quality" shall also be deemed to refer to the Board.

administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct.

- F. Section 2242 of the Code provides that the prescribing, dispensing or furnishing dangerous drugs as defined in Section 4022 without a good faith prior examination and medical indication therefore, constitutes unprofessional conduct. Section 4022 defines a "dangerous drug" as any drug unsafe for self-use, including any drug which may be lawfully dispensed only by prescription.
- G. Health and Safety Code section 11153 provides that a prescription for a controlled substance shall only be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his or her professional practice.
- H. Health and Safety Code section 11154 provides that except in the regular practice of his or her profession, no person shall knowingly prescribe, administer, dispense or furnish a controlled substance to or for any person not under his or her treatment for a pathology or condition.
- I. Health and Safety Code section 11157 provides that no person shall issue a prescription that is false or fictitious in any respect.
- J. Health and Safety Code section 11170 provides that no person shall prescribe, administer, or furnish a controlled substance for him or herself.
- K. Health and Safety Code section 11173 provides that no person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure the administration of or prescription for controlled substances by fraud, deceit, misrepresentation or subterfuge or by the concealment of a material fact; and, no person shall make a false statement in any prescription, order, report or record.

DRUGS

- 4. The following dangerous drugs or controlled substances are at issue in this Accusation:
 - A. Alprazolam is known by the trade name Xanax. It is used for the management of anxiety disorders or for the short-term relief of the symptoms of anxiety. It is a dangerous drug as defined in section 4022, a schedule IV controlled substance and narcotic as defined by section 11057,

subdivision (d) of the Health and Safety Code, and a Schedule IV controlled substance as defined by Section 1308.14 (c) of Title 21 of the Code of Federal Regulations. The usual dose of Xanax is 0.25 to 0.5 mg. three times per day.

- B. Zolpidem tartrate, known by the trade name Ambien, is a non-benzodiazepine sedative-hypnotic. It is a dangerous drug as defined in section 4022, a schedule IV controlled substance as defined by section 11057 of the Health and Safety Code, and a Schedule IV controlled substance as defined by Section 1308.14 of Title 21 of the Code of Federal Regulations. It is indicated for the short-term treatment of insomnia. The recommended dosage for adults is 10 mg. immediately before bedtime.
- Provigil, known by the trade name Modafinil, is a wakefulness-promoting agent. It is a dangerous drug as defined in section 4022, a schedule IV controlled substance as defined by section 11057 of the Health and Safety Code, and a Schedule IV controlled substance as defined by Section 1308.14 of Title 21 of the Code of Federal Regulations.
- D. Phentermine is a central nervous system stimulant similar to amphetamines. It is a dangerous drug as defined in section 4022, a schedule IV controlled substance as defined by section 11057 of the Health and Safety Code, and a Schedule IV controlled substance as defined by Section 1308.14 of Title 21 of the Code of Federal Regulations. It is used on a short-term basis for weight loss, and its actions are similar to the amphetamine drugs.

FIRST CAUSE FOR DISCIPLINE

(General Unprofessional Conduct, Unprofessional Conduct Regarding Self-Prescription of Controlled Substances)

- 7. Respondent specializes in dermatology. At all times pertinent to this Accusation, Respondent was engaged in the solo practice of dermatology in Marin County.
- 8. Beginning in October 2006, Respondent began to obtain prescription medication—in particular controlled substances—for her own use by issuing prescriptions in the names of her parents, H.K. and R.K.² Between October 2006 and May 2009, Respondent issued and filled 48 prescriptions for provigil (Modafinil), 33 prescriptions for phentermine, 80 prescriptions for

² Respondent's parents are referred to by initial to protect their privacy.

alprazolam (Xanax), and 86 prescriptions for zolpidem tartrate (Ambien). On numerous occasions, Respondent issued prescriptions to both R.K. and H.K. on the same day or within a day or two for the same medication. She used two different spellings for H.K.'s first name, and issued prescriptions under both spellings. Respondent also filled the prescriptions at several different pharmacies, often filling prescriptions for the same medication at two or more pharmacies within a several day period. Although the prescriptions were issued by Respondent in the names of H.K. and R.K., in fact, none of the medication was actually prescribed for use by either of these individuals. Respondent intended at all times that the prescriptions were for her own use.

- 9. The recommended daily dosage for Xanax is not to exceed 10 mg, and the recommended daily dosage for Ambien is not to exceed 3-6 mg. Respondent self-prescribed in amounts far exceeding the recommended daily dosage for these controlled substances. For example, between January 1, 2008 and April 30, 2008, Respondent self-prescribed 1360 mg. of alprazolam (Xanax) and 4725 mg. of zolpidem tartrate (Ambien), for an average daily dosage of 11 mg of Xanax and 39 mg of Ambien. Similarly, between August 1, 2008 and November 30, 2008, Respondent self-prescribed 1436 mg. of Xanax and 5025 mg of Ambien. Her average daily dosage during this period was nearly 12 mg of Xanax and 41 mg of Ambien.
- 10. Respondent's conduct in self-prescribing controlled substances as alleged above constitutes unprofessional conduct; and/or violation of state and federal drug statutes; and/or the self-administration of controlled substances; and/or prescribing without medical indication, and is cause for discipline pursuant to Business and Professions Code sections 2234; and/or 2238; and/or 2239; and/or 2242.
- 11. Respondent's conduct in self-prescribing controlled substances as alleged above constitutes unprofessional conduct; and/or prescribing without a legitimate medical purpose and outside of her usual or customary practice, to a person not legitimately under her medical treatment; and/or issuance of false prescriptions; and/or the self-prescription of controlled substances; and/or obtaining controlled substances by fraud, deceit or misrepresentation, and is cause for discipline pursuant to Business and Professions Code sections 2234 and/or 2238; and/or

Health and Safety Code sections 11153, and/or 11154, and/or 11157, and/or 11170, and/or 11173. SECOND CAUSE FOR DISCIPLINE (Conviction of Crime) On or about November 25, 2008, the Tiburon Police Department was contacted by a 12. concerned motorist reporting a vehicle "all over the road" engaged in erratic and dangerous driving. Officers responded and identified a vehicle driven by Respondent. The officers observed Respondent driving erratically and dangerously, veering into the wrong lane into oncoming traffic and crossing over the center and side lines. After a traffic stop, Respondent had slow speech, poor manual dexterity and appeared disoriented. She performed poorly on field sobriety tests and appeared to be under the influence of controlled substances. A consensual search of Respondent's car revealed prescription bottles of Xanax, Ambien and Phentermine prescribed to H.K and an empty Provigil bottle prescribed to R.K. Respondent was arrested and charged with driving under the influence of drugs, reckless driving, and possession of a controlled substance without a prescription. A blood test came back positive for zolpidem (Ambien) and alprazolam (Xanax). On or about August 19, 2009, as a result of a plea bargain, Respondent entered a guilty plea and was convicted of a misdemeanor violation of Vehicle Code section 23152(a) (driving under the influence of a drug.) Respondent's conviction constitutes unprofessional conduct and the conviction of a crime substantially related to the qualifications, functions or duties of a physician and surgeon and is cause for discipline pursuant to Business and Professions Code sections 2234 and 2236.

PRAYER WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board issue a decision: Revoking or suspending Physician's and Surgeon's Certificate Number A55830 issued to Julie Anne Winfield, M.D.; Revoking, suspending, or denying approval of Respondent's authority to 2. supervise physician assistants; and, Ordering Respondent to pay probation costs in the event that she is placed 3. on probation; and, Taking such other and further action as deemed necessary and proper. October 29, 2009. Dated: Medical Board of California \mathbb{R}^*